

# CLEVELAND TRI-STATE CHARITY HORSE SHOW

June 12-16, 2018

Entries Postmarked after May 11 Pay Post Entry Fees

www.tristateexhibitioncenter.com

Make checks payable to:

Cleveland Tri-State Charity Horse Show

Non-US checks must be marked "Payable in US Funds"

Mail To: Beth Snider

65 Old Taylorsville Road

Shelbyville KY 40065

Phone 502 314 7960 or Fax 502 633 6207

E-Mail: bethandscott@kih.net

## ONE HORSE PER ENTRY BLANK

PLEASE PRINT OR TYPE (Fill out completely)

**OWNER** \_\_\_\_\_ ASHA Membership Number \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

**TRAINER** \_\_\_\_\_ ASHA Membership Number \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

**RIDER/DRIVER/HANDLER** \_\_\_\_\_ ASHA Membership Number \_\_\_\_\_

**DOB (If Jr. Exhibitor)** \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

**Make Prize Money Check Payable to:** \_\_\_\_\_ **Social Security/Tax ID** \_\_\_\_\_

**Address** \_\_\_\_\_ **City/State/Zip** \_\_\_\_\_

Office use	Horse Name					Registration #	
Color		Sex		Age		Height	
Class #							Total Fees
Entry Fee							

	Total Entry Fees	\$	<b>Stable With:</b> (must appear on both entry forms)  <hr/> <b>Stalls Available Monday, June 11</b> (For Earlier Arrival, call Mack Hess (423) 667-0601)  <b>Arrival Date:</b>  <hr/> <b>Hotel while at Cleveland Tri-State                      Charity:</b>  <hr/> <b>Emergency #</b>
#	Post Entry Fee @ \$25.00 per Horse after May 11	\$	
#	Horse Stalls @ \$100.00 per Stall	\$	
#	Office Fee @ \$15.00 per Horse	\$	
#	Shavings @ \$7.00 per Bag	\$	
#	Box Seats (Seats 6) @ \$150.00 per Box	\$	
#	Ringside Parking @ \$150.00 per Parking Spot	\$	
#	RV Space @ \$35.00 per Day/Night (MUST PRE-ORDER by calling Mack Hess (423) 667-0601)	\$	
#	Other	\$	
#	Sponsorships	\$	
#		\$	
#		\$	
	<div style="text-align: right;">TOTAL REMITTANCE</div> <div>Credit Card Payment: _____ Visa _____ MC</div> <div>Number: _____</div> <div>CCV Code: _____ Billing Zip Code: _____</div> <div>Name on card: _____</div>	\$	

**ENTRY AGREEMENT ON THE BACK MUST BE SIGNED** Signed: YES No

# **CLEVELAND TRI-STATE CHARITY HORSE SHOW**

## **RELEASE OF LIABILITY**

I AGREE that neither the Cleveland Tri-State Charity Horse Show, Inc., the Tri-State Exhibition Center, Bradley County, the State of Tennessee, the show management nor the officials of the show, nor any affiliated or participating organizations, will be responsible for any accident, damage, loss or injury to mount, owner, rider or other persons or property. It will be the condition of entry that each exhibitor shall hold the horse show and its management blameless for any loss or accident to any animal, person or property that may occur at the show. Under Tennessee law, an equine professional or sponsoring organization is not liable for any injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities pursuant to T.C. A. Title 44, Chapter 20, 101-105.

I hereby enter the above horse at my own risk and agree to release the Cleveland Tri-State Charity Horse Show, it's agents, employees and/or any landholder of all liabilities or responsibilities in case of accident, loss or injury in any way connected with the show and agree to indemnify and hold harmless the Cleveland Tri-State Charity Horse Show in the event of any such liability of responsibility of any owner, lessee, trainer, agent, employee, rider/driver or any other person representing the same in case of accident, loss or injury in any way connected with the show. Furthermore, I agree to ride at my own risk and hold harmless any other owner or exhibitor from any accident or injury sustained by me or my horse while exhibiting.

### **RIDER/DRIVER/HANDLER (Mandatory)**

Signature Required (Parent/Guardian if under 18)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### **OWNER/AGENT (Mandatory)**

Signature Required (Parent/Guardian if under 18)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### **TRAINER (Mandatory)**

Signature Required (Parent/Guardian if under 18)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### **PARENT/GUARDIAN SIGNATURE (Required if Rider/Driver/Handler is a Minor)**

Minor's Name: \_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_